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MECKLENBURG COUNTY
HEALTH DEPARTMENT

APPLICATION FOR APPROVAL TO USE AN EXISTING ON-SITE WASTEWATER TREATMENT & DISPOSAL SYSTEM / WATER SUPPLY WELL

APPLICATION TYPE: (●) SEPTIC ONLY ( ) WELL ONLY ( ) SEPTIC & WELL
( ) ADDITION OR RENOVATION WITH OCCUPANCY INCREASE
(●) ADDITION OR RENOVATION WITH NO OCCUPANCY INCREASE
( ) EXCHANGE MOBILE HOME (SAME # BEDROOMS)
( ) COMMERCIAL OR INDUSTRIAL

PERSON FILING APPLICATION:
NAME: Taylor Whitman
ADDRESS: 3611 High Ridge Road
CITY: Charlotte
STATE: NC ZIP: 28270
PHONE: (336) 392-7782
ALTERNATE PHONE:
E-MAIL: taylorwhitman@gmail.com

PROPERTY OWNER: ☐ SAME AS PERSON FILING APPLICATION
NAME:
ADDRESS:
CITY:
STATE: ZIP:
PHONE:
ALTERNATE PHONE:
E-MAIL:

JOB LOCATION INFORMATION
TAX PARCEL #: 22708218
STREET ADDRESS: 3611 High Ridge Road
CITY: Charlotte
STATE: NC ZIP: 28270

SUBDIVISION OR MOBILE HOME PARK NAME:
LOT #:

WATER SUPPLY:
(●) MUNICIPAL ( ) PRIVATE WELL ( ) PUBLIC WELL ( ) SHARED WELL ( ) OTHER

RESIDENTIAL PROPERTY TYPE: ( ) N/A
(●) HOUSE ( ) MODULAR HOME ( ) MULTIPLE FAMILY
( ) SINGLE MOBILE HOME ( ) DOUBLE WIDE
( ) OTHER

OCCUPANCY (both fields are required):
NUMBER OF BEDROOMS: 4
NUMBER OF OCCUPANTS: 3

COMMERCIAL / INDUSTRIAL PROPERTY TYPE: ☐ N/A
TYPE OF BUSINESS:
EMPLOYEES PER SHIFT:
OF SHIFTS:
INDUSTRIAL WASTES? ( ) YES ( ) NO
UNDERGROUND STORAGE TANKS? ( ) YES ( ) NO

ADDITION/RENOVATION TYPE ATTACHED TO EXISTING STRUCTURE:
☐ BEDROOM ☐ BATHROOM ☐ KITCHEN ☐ DINING ROOM ☐ LIVING ROOM ☐ DEN
☐ GARAGE ☐ SUNROOM ☐ PORCH ☒ DECK ☐ OTHER

ADDITION/RENOVATION TYPE DETACHED FROM EXISTING STRUCTURE:
☐ DETACHED GARAGE ☐ DETACHED GARAGE WITH PLUMBING ☐ POOL HOUSE ☐ SHOP ☐ BARN
☐ STORAGE SHED ☐ DETACHED PORCH / DECK ☐ OTHER

*The undersigned, owner, or legal agent for the owner, of the property described above as the "Job Location" has read the foregoing application, acknowledges that the contents of same are true, and authorizes the Mecklenburg County Health Department to enter onto the property for the purpose of processing this request.

Taylor Whitman — Owner's/Agent's Signature
1/4/19 — Date

A PROPOSED PLOT PLAN (see page 2) is required to be submitted with each application.

MECKLENBURG COUNTY – GROUNDWATER & WASTEWATER SERVICES
700 N. TRYON ST. SUITE 211 CHARLOTTE, NC 28202, OFFICE: 704-336-5103, FAX: 704-336-6894

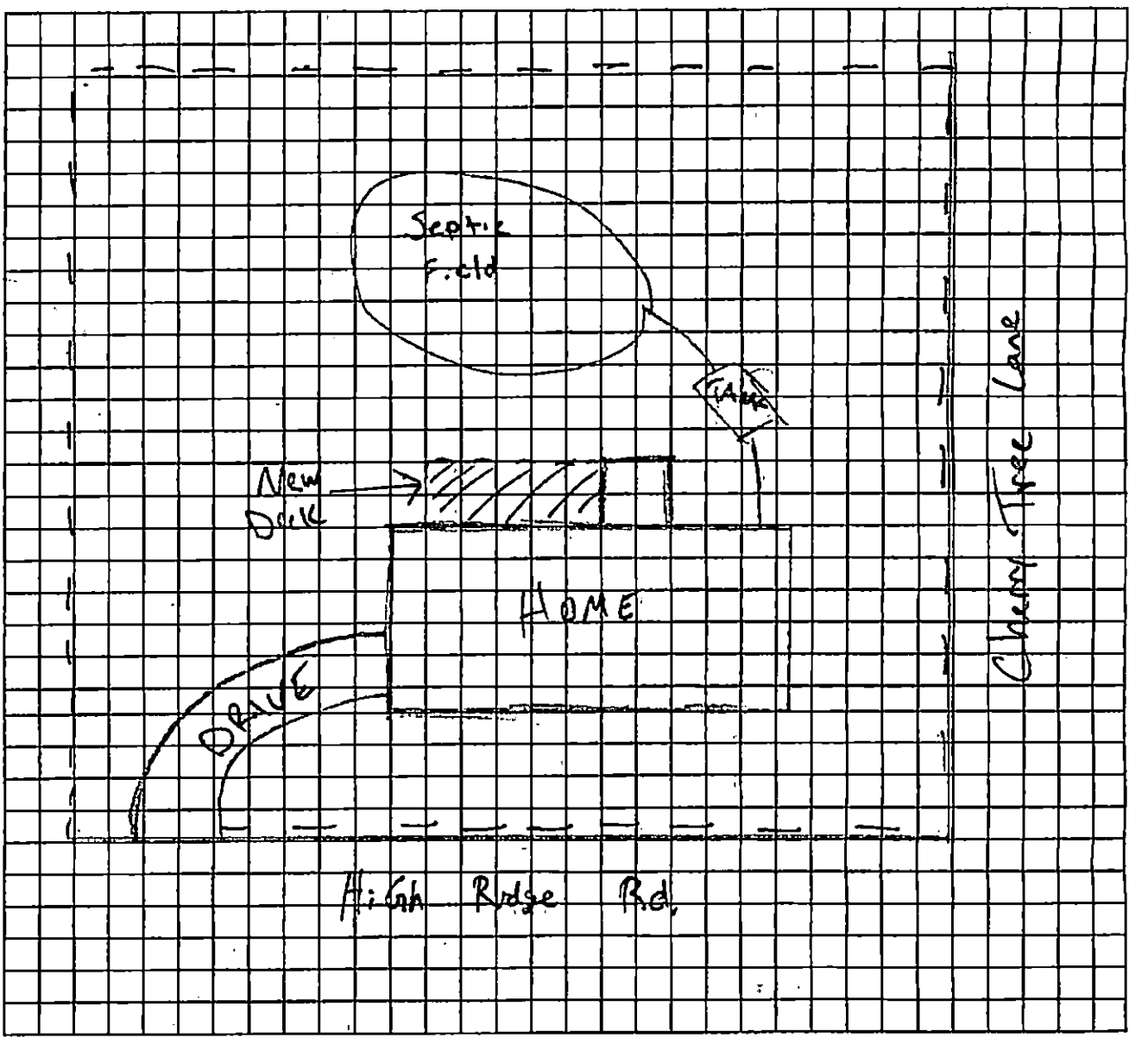
Revised on: 01/03/11

File #: _____

PROPOSED PLOT PLAN

A drawing showing the locations of the following items is required: existing and proposed property lines with dimensions, easements or right-of-ways, proposed building pad(s) or existing building footprint(s), all appurtenances (garage, driveway, deck, pool, etc.), location of existing or proposed well(s), location of existing or proposed sewer lines and sewage disposal systems, surface water bodies, and any aboveground or underground storage tanks. Provide names for all roads that adjoin the property.

Street Address: 3611 High Ridge Road Tax Parcel #: 22708218



*The undersigned, an authorized agent of the Mecklenburg County Health Department, certifies that the Department has approved the Request for the "Job Location" contained in this document. This approval is granted in accordance with the provisions of Laws and Rules for Sanitary Sewage Collection, Treatment, and Disposal and Water Supply Wells in effect at the time of issuance of the permit and is subject to the following provisions:

- No work shall be conducted on the septic tank system until an installation, construction, alteration and/or repair approval is granted by this Department.
- This permit is not transferable.
- Addition/Renovation approval valid 1 year from issuance date
- Mobile home exchange approval valid 6 months from issuance date

Customer meets required set backs for deck

Bryan Dangot 1-10-19
REHS Signature Date

MECKLENBURG COUNTY – GROUNDWATER & WASTEWATER SERVICES
700 N. TRYON ST. SUITE 211 CHARLOTTE, NC 28202, OFFICE: 704-336-5103, FAX: 704-336-6894

Revised on: 01/03/11

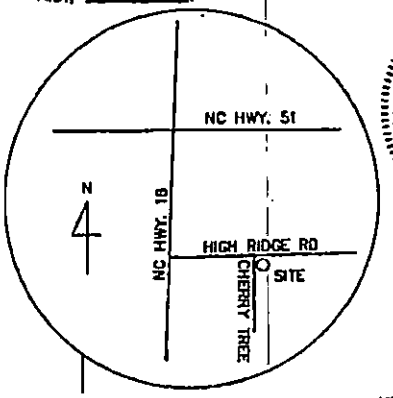
I, A.Frank Chandler,Jr., certify that this plat was drawn under my supervision from an actual survey made under my supervision, (deed description recorded in Book 31775, Page 611); that the boundaries not surveyed are clearly indicated as drawn from the deeds shown ; that the ratio of precision as calculated is 1:10,000+.

Witness my original signature, license number and seal this 19th day of JULY A.D., 2017.

NORTH CAROLINA PROFESSIONAL SEAL L-4151 LAND SURVEYOR A. FRANK CHANDLER, JR.

Professional Land Surveyor L- 4151

4131 JOYCETON ST.
CHARLOTTE, N.C. 28208
704-954-9717



VICINITY MAP-NTS

LINETYPE:
PROPERTY LINE
EASEMENT
ADJ
RW
SB

LOT 2
MB.17 PG.411
HENRY G. NEWSON PROP.

MB.17/411

N

R/W

EP

S81°54'06"W 224.08'

TODD & MELINDA MITCHELL
DB.17406 PG.378

DWELLINGS, LLC.
LOT 1
MB.17 PG.411
HENRY G. NEWSON PROP.
1.01 AC

45'SB

S08°05'10"E 195.98'

6'SB

16.0'
12.0'
31.5'
40'SB
10.8'
10.7'
2-STORY BRICK
33.0'
33.0'
19.0'
44.9'
36.9'
23.5'
WELL

40'SB

67.9'

N08°05'54"W 176.04'

CHERRY TREE LANE
EXISTING 60' PUBLIC R/W

CURVE	ARC LENGTH	RADIUS	DELTA ANGLE	CHORD BEARING	CHORD LENGTH
C1	31.42'	20.00'	90°01'04"	N36°54'38"E	28.29'

R/W

EP

N81°55'10"E 204.12'

ASPHALT DRIVE

HIGH RIDGE ROAD
EXISTING 60' PUBLIC R/W

LEGEND:
EIP ● =EXISTING IRON PIN
NIP ○ =NEW IRON PIN
R/W =RIGHT OF WAY
=POWER POLE
DB. =DEED BOOK
PG. =PAGE
MB. =MAP BOOK
NTS =NOT TO SCALE
SB =SETBACK
EP =EDGE OF PAVEMENT
OHW =OVERHEAD WIRE

NOTES:
1. ALL DISTANCES ARE HORIZONTAL.
2. CORNERS MARKED AS SHOWN.
3. SURVEY IS OF EXISTING PARCEL PIN#22708218.
4. PROPERTY SUBJECT TO UNDERGROUND UTILITIES.

0 40 80 120

PHYSICAL SURVEY
FOR

CHARLES DAVIS
3611 HIGH RIDGE ROAD
PIN#22708218

CHARLOTTE, N.C. 28270
MECKLENBURG COUNTY

SCALE: 40 FEET/INCH	DB.31775 PG.611	MB.17 PG.411
DATE: 07/19/17	DRAWING NO. 131P	DRAWN BY: AFC

MECKLENBURG COUNTY
LAND USE AND ENVIRONMENTAL SERVICES
Payment Receipt

Receipt Information

Date: 01/07/19
Receipt #: 114287
Check / Auth #: VISA 067825
Received By: ABDUSAI

Amount: 100.00
Tendered: 100.00
Returned: 0.00

Account Information

Account #: 200000
Contractor: WHITMAN, MICHAEL
Attn:
Address: 3611 HIGH RIDGE RD
Address:
City/State/Zip: CHARLOTTE, NC 28210

Item	Description	Permit#	Quantity	Unit Price	Total Price
0705	Use Existing System 3611 HIGH RIDGE RD		1	100.00	100.00

Outstanding Balances

Month-To-Date	Prior Month	30 Days	60 Days	90 Days	Balance

Payment Receipt

Mecklenburg County POS

Environmental Health
700 N. Tryon Street
Charlotte, NC 28202
Phone: 704-336-5100

Enter Account # or Customer Name Here:
MAICHAEL WHITMAN

Bill To:

MICHAEL WHITMAN
3611 HIGH RIDGE RD

Charlotte, NC 28270

Single Payment

Transaction Date: 01/07/2019 8:04 AM Pacific Time
Pay Method: VISA **********8313
Approval #: 067825
Trace Number: 74033240-2d6c-4cc2-8256-0fb9c27a5a29
Amount: $100.00

Payment Amount: $100.00

Total: $100.00

Thank you for your payment.